

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Full Name (Last, First, Middle Initial)

A. Rely on Your Beliefs Fund

Mailing Address 333 Park Central East - #214

City Springfield State MO Zip Code 65084

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
 Committee

State: District:

Transaction ID: SB23.12442

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. David Scott

Mailing Address David Scott for Congress
 162 Hurt St., NE

City Atlanta State GA Zip Code 30307

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Committee

State: GA District: 13

Transaction ID: SB23.12439

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

33500.00